

SERIAL NUMBER 09/154,646	FILING DATE 09/17/98	CLASS 426	GROUP ART UNIT 1761	ATTORNEY DOCKET NO. P97.2391
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APPLICANT CAROLYN JEAN CUPP, LIBERTY, MO; LYNN ANN GERHEART, SMITHVILLE, MO; SCOTT SCHNELL, ST. JOSEPH, MO; SHERI LYNN SMITHEY, ST. JOSEPH, MO; DONNA ELIZABETH ANDERSON, WEATHERBY LAKE, MO.

****CONTINUING DOMESTIC DATA*******

VERIFIED PROVISIONAL APPLICATION NO. 60/062,090 10/14/97

OK Kilt

****371 (NAT'L STAGE) DATA*******

VERIFIED

- Kilt

****FOREIGN APPLICATIONS*******

VERIFIED

none Kilt

CIP
09/483,328

FOREIGN FILING LICENSE GRANTED 09/29/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MO	SHEETS DRAWING 0	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
Verified and Acknowledged		Examiner's Initials	Initials		

ADDRESS HILL & SIMPSON
A PROFESSIONAL CORPORATION
85TH FLOOR SEARS TOWER
CHICAGO IL 60606 60690-1135
Bell, Boyd & Lloyd, LLC
P.O. Box 1135

10

TITLE DENTAL CARE PET FOOD

FILING FEE RECEIVED \$872	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

2002-1011

CONFIRMATION NO. 7285

SERIAL NUMBER 09/154,646	FILING DATE 09/17/1998 RULE	CLASS 426	GROUP ART UNIT 1761	ATTORNEY DOCKET NO. P97.2391
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APPLICANTS

CAROLYN JEAN CUPP, LIBERTY, MO;

LYNN ANN GERHEART, SMITHVILLE, MO;

SCOTT SCHNELL, ST. JOSEPH, MO; SHERI LYNN SMITHEY, ST. JOSEPH, MO;

DONNA ELIZABETH ANDERSON, WEATHERBY LAKE, MO;

2004-1633

** CONTINUING DATA *****

This appln claims benefit of 60/062,090 10/14/1997

OK KH

** FOREIGN APPLICATIONS *****

none KH

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/29/1998

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MO	SHEETS DRAWING	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

29157

BELL, BOYD & LLOYD LLC

P. O. BOX 1135

CHICAGO, IL

60690-1135

TITLE

DENTAL CARE PET FOOD

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees
RECEIVED	No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> 1.16 Fees (Filing)
	No. _____ for following:	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)